DEPT OF CORRECTIONS CONTRACT/MOU JUSTIFICATION FORM Incomplete forms will be returned for further information

Incomplet	e forms will be returned for further information.
Please check all that apply: New Contract	Renewal of Current Contract Current Contract Name and #:
Changes to Current Contract Current Contract Name and #:	Termination of Contract Current Contract Name and #:
Liaison making request: Date:	
	e), it is necessary to justify the issuance of a new contract or renewal of ete this form and return to the Contracts Management Bureau at
New Contract Requests (only): a. Describe scope of services (get b. Provide justification for contract provides in the contract provides as a contract provide in the contract provides as a contract provide in the contract provides as a contrac	• •
	involving an extension of the contract period): e (i.e., change of liaison, address, rate, etc.). requested change.
c. Indicate why continuation of th	current contract period): current contractor's level of performance. is contract is cost-effective to DOC. ntract to remain significantly the same? If not, please identify the
 4. Termination of Current Contract a. Justification of termination. Pleavailable). b. Effective date of termination. 	<u>::</u> ase include any correspondence between Contractor and Department (i
Internal Use Only	
	ssigned to:
Insurance Documents Status:	Date Contract Routed:
Pate Liaison ON a diait.	Date contract Nouted